2006 APPLICATION SUMMARY

The information contained in this summary will provide the New Jersey State Department of Education with basic information needed to review the application as well as an overview of the proposal for a charter school.

56110011	
GARDEN STATE ACADEMY O	CHARTER SCHOOL
Complete Proper Name of Comple	Charter School
LOCATION OF CHARTER SCHOOL	
CountyBURLINGTON	
District of ResidenceN/A	
NOTE: If planning to serve a region of residence, identify the co	ontiguous districts that comprise the region.
Districts in Region of ResidenceWILLINGBO BURLINGTON CITY, FLORENCE TWP	
CHARTER SCHOOL APPLICANT REPRESENTA	TIVE
Full Name_EDIZ BATMAZ	
Address 4050 Harbour drive	
City Palmyra	State_NJ Zip_08065
Telephone (1) (919) 601-2068	Fax (609) 543-6018
CityPalmyra	Email_ebatmaz@gmail.com
CHARTER SCHOOL INFORMATION	
Check box if requesting a planning year d List information below for the school year students.	
	The share and Clarence Too shore

Operational Year	Grade Levels Served	Projected Enrollment (TOTAL)	Teachers and Instructional Aides	Classroom Teacher -to-Student Ratio
Year 1 2007-2008	6-8	216	# Teachers14 # Inst. Aides3	15:1
Year 2 2008-2009	6-9	264	# Teachers18 # Inst. Aides5	15:1
Year 3 2009-2010	6-10	312	# Teachers22 # Inst. Aides6	14:1
Year 4 2010-2011	6-11	360	# Teachers25 # Inst. Aides7	14:1

Signature (Charter School Applicant Representative)

_07/17/2007___ Date

ii

2006 APPLICATION SUMMARY

The information contained in this summary will provide the New Jersey State Department of Education with basic information needed to review the application as well as an overview of the proposal for a charter school.

The Camden Boys Academy Charter School

Complete Proper Name of Charter school

(Include the words Charter school in the title. Do not include the name or identification of any private entity.)					
	OF CHARTER	SCHOOL			
Distri	ct of Residence: C	Camden City Publ	ic Schools		
NOTE: If playing region.	anning to serve a regio	n of residence, ident	tify the contiguous districts	that comprise the	
Districts in R	egion of Residence	e			
CHARTER	SCHOOL APPLI	CANT REPRES	ENTATIVE		
Full Name	Tracy Powell				
Address	82 Ablett Village				
City	Camden		StateNJ Zip_(08102	
	Telephone (1) Fax				
Telephone (2)		Email		
CHARTER		uesting a planning	g year during the 2007-2 ool years that the charte		
Operational	Grade Levels	Projected	Teachers and	Classroom	
Year	Served	Enrollment	Instructional Aides	Teacher –to- Student Ratio	
Year 1 2007-2008	K-8	(TOTAL) 612	# Teachers 32 # Inst. Aides 6	Average: 1:22	
Year 2	K-8	612	# Teachers 32	Average: 1:22	
2008-2009		27.2	# Inst. Aides 6		
Year 3 2009-2010	K-8	612	# Teachers <u>32</u> # Inst. Aides <u>6</u>	Average: 1:22	
Year 4 2010-2011	K-8	612	# Teachers <u>32</u> # Inst. Aides <u>6</u>	Average: 1:22	
Maren	Powell	· · · · · · · · · · · · · · · · · · ·	7/14/0		
Signature (Chart	er school Applicant Re	epresentative)	Date	-/	

2006 GRADE LEVEL SUMMARY FOR SCHOOLS <u>NOT</u> REQUESTING A PLANNING YEAR

2006 APPLICATION SUMMARY

The information contained in this summary will provide the New Jersey State Department of Education with basic information needed to review the application as well as an overview of the proposal for a charter

school.	Career Education (Charter school		
	Complete	e Proper Name o	f Charter school the name or identification of any p	rivate entity.)
	OF CHARTER S y: Camden			·
Distri	ct of Residence: C	amden City Publi	c Schools	
NOTE: If pla region.	nning to serve a regio	n of residence, identi	fy the contiguous districts t	hat comprise the
Districts in R	egion of Residence			
CHARTER	SCHOOL APPLI	CANT REPRES	ENTATIVE	
Full Name	Doreen Royd			
	1458 Ephraim Ave	nue		
City			StateNJ Zip (08103
	<u>856-963-1515</u>		Fax	
Telephone (2))		Email	
	SCHOOL INFOR	RMATION uesting a planning	year during the 2007-2001 years that the charte	2008 school year. er school will be
Operational	Grade Levels	Projected	Teachers and	Classroom
Year	Served	Enrollment	Instructional Aides	Teacher –to- Student Ratio
Year 1 2007-2008	K-8	(TOTAL) 612	# Teachers 33 # Inst. Aides 6	Average: 1:22
Year 2 2008-2009	K-8	612	# Teachers 33 # Inst. Aides 6	Average: 1:22
Year 3	K-8	612	# Teachers 33	Average: 1:22

612 Year 4 K-8 # Inst. Aides 2010-2011 Signature Charter school Applican Representative)

Inst. Aides

Teachers

Average: 1:22

K-8

2009-2010

Charter School Application WITH a Planning Year

2006 APPLICATION SUMMARY

The information contained in this summary will provide the New Jersey State Department of Education with basic information needed to review the application as well as an overview of the proposal for a charter school

Camden CompuTech Charter High School (CCCHS)

Complete Proper Name of Charter School

(Include the words Charter School in the title. Do not include the name or identification of any private entity.)

LOCATION OF CHART County <u>Camden</u>	TER SCHOOL					
District of Residence	ce <u>Camden City</u>	<u></u>	·			
NOTE: If planning to serve a	region of residence, identify the c	ontiguous o	listricts	that con	prise the region.	
Districts in Region	of Residence					
CHARTER SCHOOL A	PPLICANT REPRESENTA	TIVE				
Full Name	Alphonse A. Sorichetti					
Address	158 Briarwood Road	· · · · · · · · · · · · · · · · · · ·				
City	Mt. Laurel	State	NJ	Zip	08054	
Telephone (1)	856-234-0438	Fax	856-	222-14	46	
Telephone (2)	267-235-0847	Email	asori	chett@	aol.com	

CHARTER SCHOOL INFORMATION

Operational Year	Grade Levels Served	Projected Enrollment (TOTAL)	Teachers and Instructional Aides	ClassroomTeacher- to-Student Ratio
Year 1 2008-2009	9 - 10	400	# Teachers _16	25 to 1
2008-2009			# Inst. Aides	
Year 2 2009-2010	9 - 11	600	# Teachers	25 to 1
2009-2010			# Inst. Aides	
Year 3	9 - 12	800	# Teachers 32	25 to 1
2010-2011			# Inst. Aides	

Charter school Application $\underline{WITHOUT}$ a Planning Year

2006 APPLICATION SUMMARY

The information contained in this summary will provide the New Jersey State Department of Education with basic information needed to review the application as well as an overview of the proposal for a charter school.

The Camden Environmental	Charter school	

Complete Proper Name of Charter school (Include the words Charter school in the title. Do not include the name or identification of any private entity.)					
LOCATION	OF CHARTER S	SCHOOL			
Coun	ty: <u>Camden</u>				
Distri	ct of Residence: C	amden City Publi	c Schools		
NOTE: If pla	nning to serve a regio	n of residence, ident	ify the contiguous districts t	hat comprise the	
Districts in R	egion of Residence	,			
CHARTER	SCHOOL APPLI	CANT REPRES	ENTATIVE		
Full Name	Pamela A. Robb				
	500 North 7 th – Ap	t 1306			
City		11500	StateNJ Zip	08102	
) <u>800-917-1408</u>		Fax	00102	
) <u> </u>		Email		
•					
CHARTER	SCHOOL INFOR	MATION			
	Check box if requ	esting a planning	year during the 2007-2	2008 school year.	
			ool years that the charte		
	serving students.				
Operational	Grade Levels	Projected	Teachers and	Classroom Teacher –to-	
Year	Served	Enrollment (TOTAL)	Instructional Aides	Student Ratio	
Year 1			# Teachers 33		
2007-2008	K-8	612	# Inst. Aides $\frac{6}{6}$	Average: 1:22	
Year 2	K-8	612	# Teachers 33	Average: 1:22	
2008-2009			# Inst. Aides <u>6</u>		
Year 3	K-8	612	# Teachers 33	Average: 1:22	
2009-2010	77.0	(10	# Inst. Aides 6	A	
Year 4 2010-2011	K-8	612	# Teachers <u>33</u> # Inst. Aides 6	Average: 1:22	
2010-2011		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \			
Han a Oa	V/Y	off	7-14-00	'p	

Signature (Charter school Applicant Representative)

Date

2006 APPLICATION SUMMARY

The information contained in this summary will provide the New Jersey State Department of Education with basic information needed to review the application as well as an overview of the proposal for a charter school.

	Camden's Pride Charter School	
(Include the words	Complete Proper Name of Charter School Charter School in the title. Do not include the name or identification of any private entity.)	
LOCATION OF CHAI	RTER SCHOOL	
County	Camden	
District of Reside	ence <u>Camden</u>	
NOTE: If planning to serv	e a region of residence, identify the contiguous districts that comprise the region.	
Districts in Regio	on of Residence	<u> </u>
CHARTER SCHOOL	APPLICANT REPRESENTATIVE	
Full Name	Rebecca Brinkmann	
Address	416 Wychwood Rd	•
City Westfi	eld State NJ Zip 07096	
	(908)377-5321 Fax (856) 365-1005	
Telephone (2)	(856) 365-1000 ext 101 Email beckybrinkmann@yahoo.co	m

CHARTER SCHOOL INFORMATION

Operational Year	Grade Levels Served	Projected Enrollment (TOTAL)	Teachers and Instructional Aides	ClassroomTeacher- to-Student Ratio
Year 1 2008-2009	K,1	84	# Teachers <u>8</u> # Inst. Aides	1:11
Year 2 2009-2010	K,1,2	126	# Teachers 11 # Inst. Aides	1:12
Year 3 2010-2011	K,1,2,3	168	# Teachers <u>15</u> # Inst. Aides	1:12
Year 4 2011-2012	K,1,2,3,4	210	# Teachers	1:12

Signature (Charter School Applicant Representative)

7/17/06 Date

2006 APPLICATION SUMMARY

The information contained in this summary will provide the New Jersey State Department of Education with basic information needed to review the application as well as an overview of the proposal for a charter school.

L. KING PREPARATORY CHARTER SCHOOL

Complete Proper Name of Charter School

(Include the words Charter School in the title. Do not include the name or identification of any private entity.)

LOCATION OF CHARTER SCHOOL

County: Camden

District of Residence: Pennsauken

NOTE: If planning to serve a region of residence, identify the contiguous districts that comprise the region.

Districts in Region of Residence:

Camden City, Pennsauken, Cherry Hill, Willingboro

CHARTER SCHOOL APPLICANT REPRESENTATIVE

Full Name: Elmyra E. Randall

Address: 415 Egg Harbor Rd, Suite 15 PMB 101 City: Sewell State: NJ Zip:08080

Telephone (1) 609-505-5579

Fax: 856-256-1583

Telephone (2) 856-256-8551 Email:re100168@aol.com

CHARTER SCHOOL INFORMATION

Operational Year	Grade Levels Served	Projected Enrollment (TOTAL)	Teachers and Instructional Aides	ClassroomTeacher- to-Student Ratio
Year 1	1-4	160	# Teachers 11.5	1:20
2008-2009			# Inst. Aides 0	
Year 2	1-5	200	# Teachers 14	1:20
2009-2010			# Inst. Aides 1	
Year 3	1-6	240	# Teachers 16	1:20
2010-2011			# Inst. Aides 1	
Year 4)!-7	280	# Teachers 20	1:20
2011-2012			# Inst. Aides 1	ľ

7-14-06 Date

2006 APPLICATION SUMMARY

The information contained in this summary will provide the New Jersey State Department of Education with basic information needed to review the application as well as an overview of the proposal for a charter school.

Oasis of Excellence Charter School Complete Proper Name of Charter School

LOCATION OF CHARTER SCHOOL

County Camden County

District of Residence Lindenwold

NOTE: If planning to serve a region of residence, identify the contiguous districts that comprise the region.

Districts in Region of Residence <u>Lindenwold</u>, <u>Pine Hill</u>, <u>Clementon</u>

CHARTER SCHOOL APPLICANT REPRESENTATIVE

Full Name Veronica Boone Gbesi

Address <u>35 Tall Oaks Drive</u>
City Clementon Stat

State New Jersey

Zip <u>08021</u>

Telephone (1) 856 374-2924

Fax none

Telephone (2) 856 745-5240

Email myangeltea@hotmail.com

CHARTER SCHOOL INFORMATION

Operational Year	Grade Level Served	Projected Enrollment (TOTAL)	Teachers and Instructional Aides	Classroom Teacher- to-Student Ratio
Year 1 2008-2009	K-2	120	# Teachers 6 # Inst. Aides 2	20:1
Year 2 2009-2010	K-3	160	#Teachers 8 #Inst. Aides 3	20:1
Year 3 2010-2011	K-4	200	Teachers 10 #Inst. Aides 4	20:1
Year 4 2011-2012	K-4	200	#Teachers 10 #Inst. Aides 5	20:1

Signature (Charter School Applicant Representative)

July 16,2006

Winslow Township Public Charter School 2006 Charter School Application

Charter School Application WITHOUT a Planning Year

2006 APPLICATION SUMMARY

Winslow Township Public Charter School Complete Proper Name of Charter School

LOCATION OF CHARTER SCHOOL County	Camden
District of Residence	Winslow Township
Districts in Region of Residence	Not Applicable
CHARTER SCHOOL APPLICANT REPR	ESENTATIVE
Full Name_Dr. Angela M. Davenport Address 511 4 th Street	
City_Ocean City	State NJ Zip 08226
Telephone (1) 609-399-9083	Fax 609-399-6682
Telephone (2)609-226-0961	Emailpreferredfutures@prodigy.net
CHARTER SCHOOL INFORMATION Check box if requesting a planning year that the school years the school years that the school years the school years that the school years the	

Operational Year	Grade Levels Serves	Projected Enrollment (TOTAL)	Teachers and Instructional Aides	Classroom Teacher -to-Students Ratio
Year 1 2007-2008	Pre-K - 2	320	# TeacheRs 20 # Inst. Aides 8	11 to 1
Year 2 2008-2009	Pre-K - 3	420	# Teachers 25 # Inst. Aides 9	12 to 1
Year 3 2009-2010	Pre-K - 4	520	# Teacher 30 # Inst. Aides 10	13 to 1
Year 4 2010-2011	Pre-K - 5	620	# Teachers 35 # Inst. Aides 11	13 to 1

Signature (Charter School Applicant Representative)

 $\frac{7/15/0.6}{\text{Date}}$

Charter School Application WITHOUT a Planning Year

2006 APPLIC	ATION SUMMAR	v
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The information contained in this summary will provide the New Jersey State Department of Education with basic information needed to review the application as well as an overview of the proposal for a charter school.

	approximate approx	ation as well as an ove	rview of the proposal for a ch	arter school.
			erCHigh School	
:	Compl (Include the words Charter Scho	oto Duomin Man		rivate entity.)
	N OF CHARTER S	CHOOT		•
Cou	nty	Cape May Coun	ty	
	rict of Residence			
			he contiguous districts that co	
Distr	icts in Region of Res	idenceUpper !	Township, Ocean Cit	v. Dennis Townsh
Mid	dle Township, Nor	th Wildwood, W	Lldwood, and Lower	Township
				
CHARTER	SCHOOL APPLIC	ANT REPRESEN	TATIVE	·
Full 1	Name	Wayne C. Newe]	1	
Addre	ess	10 E. Katharin	ie Avenue	•
City		Ocean View	State N.J. Zi	n 08230
Telep	none (1)	600-300-1920	Fax 609-46	3-1986
Telep	hone (2)	609-463-1985	Email cchs07@	
CHARTER	SCHOOL INFORM	Amron		,
		ATION		
	Check box if reques List information belstudents.	sting a planning yea low for the school	ar during the 2007-2008 years that the charter sch	school year. ool will be serving
Omenation				
Operational Year	Grade Levels Served	Projected Enrollment (TOTAL)	Teachers and Instructional Aldes	Classroom Teacher -to-Student Ratio
Year 1 2007-2008 Year 2	10, 11, 12	85	# Teachers 8 8 10 10 10 10 10 10 10 10 10 10 10 10 10	10 to 1
2008-2009	10, 11, 12	0.5	#Teachers 8	

Year	Grade Devels Served	Enrollment (TOTAL)	Teachers and Instructional Aides	Classroom Teacher -to-Student Ratio
Year 1 2007-2008	10, 11, 12	85	# Teachers 8 # Inst. Aides 0	10 to 1
Year 2 2008-2009	10, 11, 12	85	# Teachers _8	
Year 3 2009-2010	10, 11, 12	85	# Teachers 8 # Inst. Aides 0	10 to 1
Year 4 2010-2011	/ 10, 11, 12 /	85	# Teachers 8 # Inst. Aides 0	10 to 1
/	× 1//	///	1	1

Signature (Gharter School Applicant Representative)

Vineland Public Charter School 2006 Charter School Application

Charter School Application WITHOUT a Planning Year

2. APPLICATION SUMMARY

Vineland Public Charter School Complete Proper Name of Charter School

		ER SCHOOL Cumber	land	Managara da		
			Vineland			
Distri	Districts in Region of ResidenceNot Applicable					
CHARTER	CHARTER SCHOOL APPLICANT REPRESENTATIVE					
Full N Addre	lameDr. An	n Garcia Mallard Lane	StateNJZip Fax856-3 l			
City_	Millville		State NJ Zip	08332		
Telepl	hone (1) 85	6-534-0495	Fax 856-3	27-2580		
Telepl	hone (2)	Emai	1			
Check List informati	CHARTER SCHOOL INFORMATION Check box if requesting a planning year during the 2007-2008 school year. List information below for the school years that the charter school will be serving students.					
Operational	1	Projected	Teachers and	Classroom		
Year	Levels	Enrollment	Instructional	Teacher		
	Serves	(TOTAL)	Aides	-to-Students Ratio		
Year 1 2007-2008	Pre-K – 2	360	# Teachers 24_ # Inst. Aides 10	10 to 1		
Year 2 2008-2009	Pre-K - 3	460	# Teachers _ 27 # Inst. Aides 11	12 to 1		
Year 3 2009-2010	Pre-K - 4	560	# Teachers _ 30 # Inst. Aides 12	13 to 1		
Year 4 2010-2011	Pre-K – 5	660	# Teachers 33 # Inst. Aides 13	14 to 1		
Signature (Ch	arter School A	pplicant Representa	tive)	Date		

The Burch Charter School of Excellence **2006 Application Summary**

Charter School Application WITH a Planning Year

2006 APPLICATION SUMMARY

The Burch Charter School of Excellence

The information contained in this summary will provide the New Jersey State Department of Education with basic information needed to review the application as well as an overview of the proposal for a charter school.

Complete Proper Nam (Include the words Charter School in the title. Do not in	e of Charter School clude the name or identification of any private entity.)
LOCATION OF CHARTER SCHOOL County_Essex_	
District of Residence <u>Irvington</u>	· .
NOTE: If planning to serve a region of residence, identify	the contiguous districts that comprise the region.
Districts in Region of Residence <u>N/A</u>	
CHARTER SCHOOL APPLICANT REPRESENTATI	VE
Full Name Veronica Ray	
Address 303 Washington Street, Third Floor	
City Newark	State NJ Zip 07102
Telephone (1) <u>973-643-0300</u>	Fax 973-624-1265
Telephone (2)	Email <u>leag281V@aol.com</u>

CHARTER SCHOOL INFORMATION

Operational Year	Grade Levels Served	Projected Enrollment (TOTAL)	Teachers and Instructional Aides	ClassroomTeacher- to-Student Ratio
Year 1 2008-2009	K-1	108	# Teachers <u>6</u> # Inst. Aides <u>3</u>	1 – 18
Year 2 2009-2010	K-2	162	# Teachers 9 # Inst. Aides 2	1 – 18
Year 3 2010-2011	K-3	216	# Teachers 12 # Inst. Aides 2	1 – 18
Year 4 2011-2012	K-4	270	# Teachers 15 # Inst. Aides 2	1 - 18

Signature (Charter School Applicant Representative)

July 14, 2006 Date

Signature (Charter School Applicant Representative)

Charter School Application WITHOUT a Planning Year

2006 APPLICATION SUMMARY

The information contained in this summary will provide the New Jersey State Department of Education with basic information needed to review the application as well as an overview of the proposal for a charter school.

Children's Charter School of Newark Complete Proper Name of Charter School

(Include the words Charter School in the title. Do not include the name or identification of any private entity.)

LOCATION	OF CHARLER SCI	LOOL		
County	Essex			
District of Res		ewark, NJ		
•	_	· · · · · · · · · · · · · · · · · · ·	ne contiguous districts	that comprise the region.
Districts in Re	gion of Residence			
		• .	· · · · · · · · · · · · · · · · · · ·	
		CHOOL APPLIC	CANT REPRESE	ENTATIVE
	Zeribe Ezeanuna			
	249 Shetland Drive			
City Union		Zip_07108	·	
	908-247-5975		73-286-0036	
Telephone (2)	<u>908-247-6459</u>			
			L INFORMATIO	
	Check box if request information below for the	ing a planning year o	luring the 2006-2007	school year. List
	information below for th	ie schooi vears that ti	ne charter school will	be serving students.
	miormation octov for a	io somoor jours muc a	io chartor bolloor will	<u> </u>
	mormation oblow for a	io sollool yours that a	TO CHARTON DOLLOW WILL	
Operational	Grade Levels		Teachers and	
Operational Year		Projected Enrollment		Teacher (only
, -	Grade Levels	Projected	Teachers and	Teacher (only
Year	Grade Levels	Projected Enrollment	Teachers and Instructional A	Teacher (only aides -to- Student Ratio
-	Grade Levels Served	Projected Enrollment (TOTAL)	Teachers and Instructional A # Teachers	Teacher (only to-Student Ratio
Year	Grade Levels	Projected Enrollment	Teachers and Instructional A	Teacher (only aides -to- Student Ratio
Year 1	Grade Levels Served	Projected Enrollment (TOTAL)	Teachers and Instructional A # Teachers # Inst. Aides	Teacher (only to-Student Ratio 12 8 1:15
Year	Grade Levels Served	Projected Enrollment (TOTAL)	Teachers and Instructional A # Teachers # Inst. Aides # Teachers	Teacher (only -to- Student Ratio 1:15
Year 1	Grade Levels Served K- 2	Projected Enrollment (TOTAL)	# Teachers # Inst. Aides # Teachers # Inst. Aides	Teacher (only -to- Student Ratio 12 8 1:15
Year 1	Grade Levels Served K- 2 K- 3	Projected Enrollment (TOTAL) 180	# Teachers # Inst. Aides # Teachers # Inst. Aides # Teachers	Teacher (only-to-Student Ratio 12 8 1:15 16 12 1:15
Year 1 2	Grade Levels Served K- 2	Projected Enrollment (TOTAL)	# Teachers # Inst. Aides # Teachers # Inst. Aides # Teachers	Teacher (only to- Student Ratio 12
1 2 3	Grade Levels Served K- 2 K- 3	Projected Enrollment (TOTAL) 180	Teachers and Instructional A # Teachers # Inst. Aides # Teachers # Inst. Aides # Teachers # Inst. Aides	Teacher (only to-student Ratio) 12/8 1:15 16/12 1:15 20/16 1:15
Year 1 2	Grade Levels Served K- 2 K- 3 K- 4	Projected Enrollment (TOTAL) 180 240 300	# Teachers # Inst. Aides	Teacher (only-to-Student Ratio 1:15
1 2 3	Grade Levels Served K- 2 K- 3	Projected Enrollment (TOTAL) 180	# Teachers # Inst. Aides	Teacher (only to-student Ratio) 12/8 1:15 16/12 1:15 20/16 1:15

Date

Cooper Beech Tree Charter School Grade Level Summary

2006 NEW JERSEY CHARTER SCHOOL APPLICATION DUE JULY 17, 2006 Charter School Application WITH a Planning Year 2006 APPLICATION SUMMARY

The information contained in this summary will provide the New Jersey State Department of Education with basic information needed to review the application as well as an overview of the proposal for a charter school.

Cooper Beech Tree Charter School				
Complete Proper Name of Charter School				
(Include the words Charter School in the title. Do not include the name or identification of any private entity.)				
LOCATION OF CHARTER SCHOOL				
County Essex and Union				
District of Residence				
NOTE: If planning to serve a region of residence, identify the contiguous districts that comprise the				
region.				
Districts in Region of Residence:				
Maplewood/South Orange, Millburn, Springfield, Union CHARTER SCHOOL APPLICANT REPRESENTATIVE Full NameSimone Miller				
Address 35 Skylark Road 72 07081				
City Springfield State NJ Zip 07081				
Talanhana (1) 908-608-0679 Fax				
Telephone (1)Email_simonemiller@verizon.net				
CHARTER SCHOOL INFORMATION				
CHARTER SCHOOL IN CHARTEST				

Operational Year	Grade Levels Served	Projected Enrollment (TOTAL)	Teachers and Instructional Aides	ClassroomTeacher- to-Student Ratio
Year 1 2008-2009	K-5	89	# Teachers: 10 # Inst. Aides:1	1:9
Year 2 2009-2010	K-6	107	# Teachers:11 # Inst. Aides:1	1:15
Year 3 2010-2011	K-7	153	# Teachers:13 # Inst. Aides:2	1:15
Year 4 2011-2012	K-8	174	# Teachers:14 # Inst. Aides:2	1:15

7014 14 2006 Signature (Charter School Applicant Representative) Date

15

2006 APPLICATION SUMMARY

The information contained in this summary will provide the New Jersey State Department of Education with basic information needed to review the application as well as an overview of the proposal for a charter school.

Global Experience Charter School

Complete Proper Name of Charter School

(Include the words Charter School in the title. Do not include the name or identification of any private entity.)

LOCATION OF CHARTER SCHOOL

County

Essex County

District of Residence

South Orange- Maplewood

NOTE: If planning to serve a region of residence, identify the contiguous	districts that comprise the region.
Districts in Region of Residence	

CHARTER SCHOOL APPLICANT REPRESENTATIVE

Full Name

Marjorie Lloyd-Waluye

Address

Four Northview Terrace

City

Maplewood

State New Jersey

Zip 07040

Telephone (1) 973 -761 1512

Fax 973 762 1980

Telephone (2) 973-761 1512

Email

SOMECS@Comcast.net

CHARTER SCHOOL INFORMATION

Operational Year	Grade Levels Served	Projected Enrollment (TOTAL)	Teachers and Instructional Aides	ClassroomTeacher- to-Student Ratio
Year 1 2008-2009	10	90	# Teachers 4.8 # Inst. Aides	1:18
Year 2 2009-2010	10,11	180	# Teachers 8.6 # Inst. Aides	1:20
Year 3 2010-2011	10,11,12	270	# Teachers 15 # Inst. Aides	1:20
Year 4 2011-2012	10,11,12	270	# Teachers 15 # Inst. Aides	1:20

Signature (Charter School Applicant Representative)	Date

2006 APPLICATION SUMMARY

The information contained in this summary will provide the New Jersey State Department of Education with basic information needed to review the application as well as an overview of the proposal for a charter school.

	NEWARK	ACADEMY HIGH	CHARTER SCHOOL	
	Comp	late Proper Name of	Charter School the name or identification of	any private entity.)
(Include the w	ords Charter School in th	e title. Do not include	the name of identification of) <u>F</u>
LOCATION O	F CHARTER SCHOOL	L		
County	y: ESSEX			
Distric	t of Residence:	NEWARK	 	
NOTE: If plant	ning to serve a region of	residence, identify the	contiguous districts that comp	prise the region.
Distric	ts in Region of Resid	ence: N/A		
CHARTER SCI	HOOL APPLICANT R	EPRESENTATIVE		
Full N	ame: MESUT SAF	<u>IIN</u>		
Addre	ss:	field <u>Ave.</u>		
City:	Clifton	State: NJ	Zip: <u>07012</u>	
Teleph	none (1): <u>(862)</u> 262-	3940	Fax:: (973) 596-5222	
Telent	none (2): (973) 596-	5573	Email: sahin@njit.edu	
recept	10He (2). 11197			
CHARTER SC	HOOL INFORMATIO	N		
			1 - 2007 2009 school year	
	Check box if requesting	g a planning year during	the 2007-2008 school year. at the charter school will be se	erving students.
	List information below	Tor the school years the	11 110 011111	
	0 1 1 1	Projected	Teachers and	Classroom
Operational	Grade Levels	Enrollment	Instructional Aides	Teacher -to-
Year	Served	(TOTAL)		Student Ratio
Year 1	7-9	200	# Teachers 14	14
2007-2008	1-7		# Inst. Aides 2	
Year 2	7-10	275	# Teachers 20 # Inst. Aides 2	14
2008-2009			# Inst. Aides 2 25 # Teachers 25	
Year 3	7 11	350	# 1 eachers 25	14

Signature (Charter School Applicant Representative)

2009-2010

Year 4

2010-2011

7-11

7-12

14

350

425

Inst. Aides

Inst. Aides

Teachers

30

<u>3</u>

Signature (Charter School Applicant Representative

Charter School Application WITHOUT a Planning Year

2006 APPLICATION SUMMARY

The information contained in this summary will provide the New Jersey State Department of Education with basic information needed to review the application as well as an overview of the proposal for a charter school.

QUEST FOR KNOWLEDGE CHARTER SCHOOL

Complete Proper Name of Charter School

(Include the words Charter School in the title. Do not include the name or identification of any private entity.)

	OF CHARTER SC			
Count	yESSEX	COUNTY		
Distri	ct of Residence_ <u>IRVI</u>	NGTON		
NOTE: If pla	nning to serve a region of	f residence, identify the	contiguous districts that con	mprise the region.
Distri	cts in Region of Resid	lence NOT AP	PLICABLE	···
CHARTER	SCHOOL APPLICA	NT REPRESENT	ATIVE	
Full N	lame James Durante	e, Ed.D.		
·	ess 12 Frederick Place			
City	Cedar Knolls	State NJ	Zip <u>07927</u>	
· -	hone (1) 973-451-0	157	Fax	
	one (2) 201-826-21		nail Jdurante55@opto	<u>nline.net</u>
				,
CHARTER S	SCHOOL INFORM	ATION		
			r during the 2007-2008	school year.
	List information hel	ow for the school v	ears that the charter sch	ool will be serving
		OW IOI <u>the believel</u>	Out that are straight to	
	pupils.			
Operational	Grade Levels Served	Projected	Teachers and	Classroom Teacher
Year		Enrollment (TOTAL)	Instructional Aides	-to-Pupil Ratio
Year 1	K-2	216	# Teachers 12	1/18
2007-2008			# Inst. Aides 12 # Teachers 16	1/18
Year 2	K-3	288	# Teachers <u>16</u> # Inst. Aides <u>14</u>	1/10
2008-2009 Year 3	K-4	360	# Teachers 20	1/18
2009-2010	A-4	500	# Inst. Aides 16	
Year 4	K-4	360	# Teachers 20	1/18 /
2010-2011			# Inst. Aides $\overline{16}$	

1-2

PRIDE ACADEMY CHARTER SCHOOL 2006 APPLICATION AND GRADE LEVEL SUMMARY

Charter School Application WITHOUT a Planning Year

2006 APPLICATION SUMMARY

The information contained in this summary will provide the New Jersey State Department of Education with basic information needed to review the application as well as an overview of the proposal for a charter school.

Pride Academy Charter School

Complete Proper Name of Charter School

(Include the words Charter School in the title. Do not include the name or identification of any private entity.)

LOCATION OF CHARTER SCHOOL

County: Essex County

District of Residence: Not Applicable

NOTE: If planning to serve a region of residence, identify the contiguous districts that comprise the

region.

Districts in Region of Residence: Orange, East Orange, and Newark, NJ

CHARTER SCHOOL APPLICANT REPRESENTATIVE

Full Name

Amanda Hayes

Address

234 Woodside Avenue

City

Newark

New Jersey Zip State

Telephone (1) 201-736-7275

Fax Not Applicable

Telephone (2) Not Applicable

Email achayes6@hotmail.com

07104

CHARTER SCHOOL INFORMATION

Check box if requesting a planning year during the 2007-2008 school year. List information below for the school years that the charter school will be serving students.

Operational Year	Grade Levels Served	Projected Enrollment (TOTAL)	Teachers and Instructional Aides	Classroom Teacher –to- Student Ratio
Year 1 2007-2008	5-8	240	# Teachers <u>23</u> # Inst. Aides <u>2</u>	9.6-1
Year 2 2008-2009	5-8	240	# Teachers 23 # Inst. Aides 2	9.6-1
Year 3 2009-2010	5-8	240	# Teachers 23 # Inst. Aides 2	9.6-1
Year 4 2010-2011	5-8	240	# Teachers <u>23</u> # Inst. Aides <u>2</u>	9.6-1

Signature (Charter School Applicant Representative)

2006 APPLICATION SUMMARY

The information contained in this summary will provide the New Jersey State Department of Education with basic information needed to review the application as well as an overview of the proposal for a charter school.

Capital Preparatory Charter High School

LOCATION OF CHARTER SCHOOL

County Mercer

NOTE: If planning to serve a **region of residence**, identify the contiguous districts that comprise the region.

Districts in Region of Residence Ewing Township and City of Trenton

CHARTER SCHOOL APPLICANT REPRESENTATIVE

Full Name	Ms Jessie Tossie			
Address	75 Bryn Mawr Ave			
City	Trenton	State <u>NJ</u>	Zip 00818	
Telephone (1) 609-394-1854			Fax
Telephone (2	2)	Email		
CHARTER SCHO	OL INFORMATION			
ye.	neck box if requesting a plan ar. List information below to ool will be serving students	for the school years t	2007-2008 school hat the charter	

Operational Year	Grade Levels	Projected Enrollment (TOTAL)	Teachers and Instructional	Classroom -to-Student
Year I			# Teachers 15	
2008-2009	9 and 10	200	# Inst. Aides 2	13
Year 2			# Teachers 20	
2009-2010	9,10 and 11	300	# Inst. Aides 3	15
Year 3			# Teachers 25	
2010-2011	9,10,11 and 12	400	# Inst. Aides 4	15
Year 4			# Teachers 25	
2011-2012	9,10,11 and 12	400	# Inst Aides 4	15

Signature (Charter School Applicant Representative)

Date 7-12-06

2006 APPLICATION SUMMARY

The information contained in this summary will provide the New Jersey State Department of Education with basic information needed to review the application as well as an overview of the proposal for a charter school.

Learning is Everybody's	Complete Pro	oner Name of	Charter School he name or identification of an	y private entity.)
		•		
LOCATION OF CH		JL		
County <u>M</u>				
District of Res	sidence			
NOTE: If planning to s				
Districts in Re	egion of Residence	e: <u>Trenton, Ne</u>	w Jersey and Ewing.	New Jersey
CHARTER SCHOO	L APPLICANT	REPRESEN	TATIVE	
. <i>'</i>				
Full Name	Andrea Louise Jo	nes Schutz		
	8 Morgan Place			
City Princet		State NJ	Zip <u>08540</u>	
	609-921-6373	3 - 1	Fax	
Telephone (2)				
	utz746@aol.com			
Lillan asci	ICILZ/-TO(CO,COT.COTI			•
CHARTER SCHOO	N TAIRADMATI	ION		
CHARTER SCHOOL	JL INFORMATI	ION		
Onevetional	Grade Levels	Projected	Teachers and In-	Classroom Teacher-
Operational Year	Served	Enrollment	structional Aides	to-Student Ratio
I car	Sciveu	(TOTAL)		
Year 1	1, 2	105	# Teachers 6	17.5:1
2008-2009	1, 2	1	# Inst. Aides 3	
Year 2	1, 2, 3	165	# Teachers 10	16.5:1
2009-2010	-,-,		# Inst. Aides 3	
Year 3	K, 1, 2, 3, 4	270	# Teachers 13	20.7:1

330

Inst. Aides

Inst. Aides

Teachers

16

6

20.6:1

Signature (Charter School Applicant Representative)	Date
Signature (Charter School Applicant Representative)	2

K, 1, 2, 3, 4, 5

Planning Year - No students

2010-2011

Year 4

2011-2012

Year 1 - Grade 1 - 15:1; Grade 2 - 20:1

Year 2 - Grade 1 - 15:1; Grade 2 - 20:1; Grade 3 - 20:1

Year 3 - Kindergarten - 15:1; Grade 1 - 15:1; Grade 2 - 20:1; Grade 3 - 20:1; Grade 4 - 20:1

Year 4 - Kindergarten - 15:1; Grade 1 - 15:1; Grade 2 - 20:1; Grade 3 - 20:1; Grade 4 - 20:1

Charter School Application WITHOUT a Planning Year

2006 APPLICATION S	
The information contained in this summary will provide the New	Jersey State Department of Education with basic
information needed to review the application as well as an overvi	ew of the proposal for a charter school.
Mercer Arts Charter High School	
Complete Proper Name of	Charter School
(Include the words Charter School in the title. Do not include the	he name or identification of any private entity.)
LOCATION OF CHARTER SCHOOL	
County_Mercer	
District of ResidenceLocated in West W	indsor – Plainsboro
	-
NOTE: If planning to serve a region of residence, identify the	continuous districts that comprise the region
INOTE: If planning to serve a region of residence, identity inc	contiguous districts that comprise the region.
Districts in Region of ResidencePrincet	on Regional. Lawrence Twp.
Hopewell Valley Regional, West Windosor-Plainsbor	o Regional. Trenton City, Ewing Twp
Tropewen vancy regionar, west windows ramineer	0 1108-010-01
CHARTER SCHOOL APPLICANT REPRESENT	ATIVE
Full NameBarabara Taylor	
Address 207 Laurel Circle	
CityPrinceton	State NJ Zip 08540
Telephone (1) 609-921-7698	Fax 609-921-0563
Telephone (2) 609-218-4816	EmailBARB4125@aol.com
CHARTER SCHOOL INFORMATION	
Check box if requesting a planning year	r during the 2007-2008 school year.
List information below for the school y	ears that the charter school will be serving
students.	

Operational Year	Grade Levels Served	Projected Enrollment (TOTAL)	Teachers and Instructional Aides	Classroom Teacher -to-Student Ratio
Year 1 2007-2008	9 - 10	300	# Teachers16 # Inst. Aides6_	18.75:1
Year 2 2008-2009	9 - 11	450	# Teachers24 # Inst. Aides9	18.75:1
Year 3 2009-2010	9 – 12	600	# Teachers32 # Inst. Aides12	18.75:1
Year 4 2010-2011	9 - 12	600	# Teachers32 # Inst. Aides12	18.75:1

Signature (Charter School Applicant Representative)

Charter School Application WITHOUT a Planning Year

2006 APPLICATION SUMMARY

The information contained in this summary will provide the New Jersey State Department of Education with basic information needed to review the application as well as an overview of the proposal for a charter school.

	Paul Robeson	ı Charter Scho	ool for the Humanities	<u> </u>
(Inc	Complete lude the words Charter School in	Proper Name on the title. Do not include	f Charter School the name or identification of any priva	ate entity.)
LOCATION County	OF CHARTER SCH	OOL		
Distric	t of Residence			
NOTE: If plan	nning to serve a region of	residence, identify the	he contiguous districts that con	nprise the region.
Distric	ts in Region of Reside	enceTrenton,	Ewing	
CHARTER S	SCHOOL APPLICA	NT REPRESEN	TATIVE	
Addre	104 LaDamo	Ave	State_NJ Zip_08618 Fax(609) 989-0 Email_BarbaraGae	
CHARTER	SCHOOL INFORM	ATION		
	Check box if request List information below tudents.	ting a planning ye ow for <u>the school</u>	ear during the 2007-2008 years that the charter sch	001 WIII DE SELVING
Operational Year	Grade Levels Served	Projected Enrollment (TOTAL)	Teachers and Instructional Aides	Classroom Teacher -to-Student Ratio
Year 1	4,5,6	180	# Teachers17 # Inst. Aides5_	1:11
2007-2008 Year 2	4,5,6,7	240	# Teachers26	1:14
2008-2009 Year 3	4,5,6,7,8	300	# Inst. Aides 6 # Teachers _ 35 # Inst. Aides 7	1:14
2009-2010	15678	300	# Inst. Aides / Teachers _35_	1:14

Signature (Charter School Applicant Representative)

Year 4

2010-2011

4,5,6,7,8

Inst. Aides

300

Charter School Application WITHOUT a Planning Year

2006 APPLICATION SUMMARY

The information contained in this summary will provide the New Jersey State Department of Education with basic information needed to review the application as well as an overview of the proposal for a charter school.

River City Charter School

Complete Proper Name of Charter School

(Include the words Charter School in the title. Do not include the name or identification of any private entity.)

	OF CHARTER SCI	Mer	cer	
	et of Residence		oton	
NOTE: If pla	nning to serve a region of	residence, identify th	e contiguous districts that con	nprise the region.
Distric	cts in Region of Resid	ence		
CHARTER S	SCHOOL APPLICA	NT REPRESEN	FATIVE	
Full N	ame Lisa M. K	Kasabach		
	ss 241 Mercer S			08611
City	Trenton none (1) 609 - 39	4 - BOIR	Fax	
I elepi Telepi	none (2) 609 - 63	A - 3603	Email LKASABA	ACH & AOL . COM
	List information belostudents.	ting a planning year ow for the school	ar during the 2007-2008 years that the charter sch	ool will be serving
Operational Year	Grade Levels Served	Projected Enrollment (TOTAL)	Teachers and Instructional Aides	Classroom Teacher -to-Student Ratio
Year 1 2007-2008	K-3	68	# Teachers 4 2	7:17
Year 2 2008-2009	K-4	85	# Teachers	1:17
Year 3 2009-2010	K-5	102	# Teachers 6 3 # Teachers 7	1:17
Year 4 2010-2011	K-6	119	# Teachers	1:17
liso	cm. Kasah ter School Applicant Repr	esentative)		7116 06 Date

2006 APPLICATION SUMMARY

The information contained in this summary will provide the New Jersey State Department of Education with basic information needed to review the application as well as an overview of the proposal for a charter school.

Advanced Math and Science Charter School

(Include	Complet the words Charter School in	e Proper Name of the title. Do not include the	F Charter School e name or identification of any pr	rivate entity.)
	OF CHARTER S y <u>Middlesex</u>	CHOOL		
District of Re. NOTE: If pla region.	sidence nning to serve a region	of residence, identify	the contiguous districts the	nat comprise the
Districts in Re Old Bridge	egion of Residence	East Brunswick,	North Brunswick, Ne	w Brunswick,
CHARTER S	SCHOOL APPLIC	CANT REPRESE	NTATIVE	
Full Name	Anatoly Rakovsk	у		
Address 23	Morsell Pl			
City Old B		<u></u>	State NJ Zip_	
Telephone (1)	732 313 6141		Fax <u>732 313 6141</u>	
Telephone (2)	<u>646 2706258</u>		Email_amsschool@	vahoo.com
CHARTER S	SCHOOL INFOR	£	year during the 2007-2	2008 school year.
	List information l serving students.	pelow for the school	ol years that the charte	r school will be
Operational	Grade Levels	Projected	Teachers and	Classroom
Year	Served	Enrollment (TOTAL)	Instructional Aides	Teacherto- Student Ratio
Year 1	6,7	. 120	# Teachers 8FT, 2PT # Inst. Aides 2	1:13

180

240

300

Teachers

Teachers

Teachers

Inst. Aides

Inst. Aides

Inst. Aides

12FT

14FT

17FT

1:17

1:17

1:17

Advanced Math and Science Charter School Charter Application / Application Summary

6-8

6-9

6-10

Signature (Charter School Applicant Representative)

Year 2

2008-2009

Year 3

2009-2010

Year 4

2010-2011

2006 APPLICATION SUMMARY

The information contained in this summary will provide the New Jersey State Department of Education with basic information needed to review the application as well as an overview of the proposal for a charter school.

Community Charter School of Paterson Complete Proper Name of Charter School (Include the words Charter School in the title. Do not include the name or identification of any private entity.) LOCATION OF CHARTER SCHOOL County Passaic District of Residence <u>Paterson</u> NOTE: If planning to serve a region of residence, identify the contiguous districts that comprise the region. Districts in Region of Residence CHARTER SCHOOL APPLICANT REPRESENTATIVE Full Name Robert F. Guarasci Address 32 Spruce Street State <u>NJ</u> Zip <u>07501</u> City Paterson 973-413-1600 Telephone (1) Fax 973-413-1640 Telephone (2) Email rguarasci@njcdc.org CHARTER SCHOOL INFORMATION Check box if requesting a planning year during the 2007-2008 school year. List information below for the school years that the charter school will be serving students.

Operational Year	Grade Levels Served	Projected Enrollment (TOTAL)	Teachers and Instructional Aides	Teacher (only) -to- Student Ratio
1	K-3	400	# Teachers 24 # Inst. Aides 9	1:16.6
2	K-4	500	# Teachers 30 # Inst. Aides 10	1:16.6
3	K-4	500	# Teachers 30 # Inst. Aides 10	1:16.6
4	K-4	500	# Teachers 30 # Inst. Aides 10	1:16.6

Signature (Charter School Applicant Representative)

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2006 APPLICATION SUMMARY

The information contained in this summary will provide the New Jersey State Department of Education with basic information needed to review the application as well as an overview of the proposal for a charter school.

	a to review the applicance			
Near Easter	rn And Engineering C	Charter School		
	Complete	Droper Name of (Tharter School	
(Incl	iude the words Charter School in	the title. Do not include the	name or identification of any pr	ivate entity.)
LOCATION	OF CHARTER SCH	IOOL		
	Passaic			
County	1 assure			
District	t of Residence_Pater	rson		
NOTE: If plan	ming to serve a region of	residence, identify the	contiguous districts that c	omprise the region.
Distric	ts in Region of Resid	ence		·
15101110	<i>U</i>			
CHADTEDS	CHOOL APPLICA	NT REPRESENT	ATIVE	
CHARLERS	CHOOLINIE			
E.,11 N.	ame Raed Danda	n		÷
ruii ina	anne Nacu Danua	11 <u> </u>		
Addres	SS_04 LIIIUa VISIa A	State N	Zip_075	508
City	North Haledon	120 Fo		
Teleph	none (1)973-417-6	1432 Fa	Email iefni@ao	1 com
Teleph	none (2)		Email_iefnj@ao	1.00111
CHARTER S	SCHOOL INFORM	ATION		
				
[]	Check box if reques	ting a planning year	during the 2007-200	8 school year.
	List information bel	ow for the school y	ears that the charter so	chool will be serving
	students.			
				Classroom Teacher
Operational	Grade Levels Served	Projected	Teachers and	
Year		Enrollment	Instructional Aides	-to-Student Natio
		(TOTAL)	1 m - 1 20	
Year 1	9 th 10 th 11 th	220	# Teachers _28_ # Inst. Aides _3_	1:7.86
2007-2008	7 10 11		# Teachers 28_	
Year 2	9 th 10 th 11 th 12 th	320	# Inst. Aides3	1:11.43
2008-2009	9-10-11-12	320		
Year 3 2009-2010	9 th 10 th 11 th 12 th	400	# Inst. Aides3_	1:14.29
Year 4	7 10 11 12		# Teachers 28	
rear 4	oth 10th 11th 1045	400	# Inst Aides 3	1:14.29

400

Inst. Aides

2010-2011

9th 10th 11th 12th

Signature (Charter School Applicant Representative)

2006 APPLICATION SUMMARY

The information contained in this summary will provide the New Jersey State Department of Education with basic information needed to review the application as well as an overview of the proposal for a charter school.

Paterson Lights Charter School

(Include the words Charter School in the title. Do not include the name or identification of any private entity.)

LOCATION	OF CHARTER SCH	OOL		
		assaic		
Distric	t of Residence	Paterson		
NOTE: If plan	nning to serve a region of	residence, identify th	e contiguous districts that con	nprise the region.
Distric	ts in Region of Reside	ence		
CHARTER S	SCHOOL APPLICA	NT REPRESEN	TATIVE	
Full N	ame Mark Culliton ss 1661 Worcester	P.d.		
Addre	Framingham	Nu.	State MA Zip	01701
Telenl	none (1) 508.626.09	Ո1 v 22	Fax 508.626.0905	j
Telepl	none (2) 508.561.07	27 Email_n	nculliton@lighthouse-aca	demies.org
CHARTER	Check box if request List information below tudents.	ting a planning ve:	ar during the 2007-2008 years that the charter sch	001 WIII de serving
Operational Year	Grade Levels Served	Projected Enrollment (TOTAL)	Teachers and Instructional Aides	Classroom Teacher -to-Student Ratio
Year 1 2007-2008	K-5	280	# Teachers <u>12</u> # Inst. Aides <u>3</u>	24
Year 2	K-6	328	# Teachers 14 # Inst. Aides 3	24
2008-2009 Year 3	K-7	376	# Teachers 16	24
2009-2010			# Inst. Aides 4	24
Year 4	K-8	424	# Teachers18	24
2010-2011	11/		11 11001 12000	7/14/6
Signature (Char	ter School Applicant Repr	resentative)		Date

Charter Application 2006
2006 APPLICATION SUMMARY

Charter School Application WITH a Planning Year

The information contained in this summary will provide the New Jersey State Department of Education with basic information needed to review the application as well as an overview of the proposal for a charter school.

Regional Charter School for Social Justice and Equality Complete Proper Name of Charter School

(Include the words Charter School in the title. Do not include the name or identification of any private entity.)

LOCATION OF CHARTER SCHOOL					
County:	Passaic County				
	N/A				

NOTE: If planning to serve a **region of residence**, identify the contiguous districts that comprise the region.

Districts in Region of Residence: Passaic City, Clifton City and Paterson City in the County of Passaic

CHARTER SCHOOL APPLICANT REPRESENTATIVE

Full Name: <u>Jenny</u>	Rivera, School Ap	plicant	Representative
Address: 27 Home	e Place		
City: Lodi	State: Nev		
Telephone (1)	973-253-0042	Fax:	973-253-0042
Telephone (2) <u>201</u>			Email: jrsocialworker@aim.com
1010p110110 (=)===			

CHARTER SCHOOL INFORMATION

Operational Year	Grade Levels Served	Projected Enrollment (TOTAL)	Teachers and Instructional Aides	Classroom Teacher-to- Student Ratio
Year 1 2008-2009	K-12	240	# Teachers 21 # Inst. Aides -0-	1:15
Year 2 2009-2010	K-12	390	# Teachers 26 # Inst. Aides -0-	1:15
Year 3 2010-2011	K-12	390	# Teachers 26 # Inst. Aides -0-	1:15
Year 4 2011-2012	K-12	390	# Teachers 26 # Inst. Aides -0-	1:15

Signature (Charter School Applicant Representative)

6/30/06 Date

Charter School Application WITHOUT a Planning Year

2006 APPLICATION SUMMARY

The information contained in this summary will provide the New Jersey State Department of Education with basic information needed to review the application as well as an overview of the proposal for a charter school.

WORLD LANGUAGES & TECH CHARTER HIGH SCHOOL (WLT)

Complete Proper Name of Charter School

(Include the words Charter School in the title. Do not include the name or identification of any private entity.)

LOCATION OF CHARTER SCHOOL

County:

PASSAIC

District of Residence:

CITY OF PATERSON

NOTE: If planning to serve a region of residence, identify the contiguous districts that comprise the region.

Districts in Region of Residence:

N/A

CHARTER SCHOOL APPLICANT REPRESENTATIVE

Full Name:

Zoran Korach, Ph.D.

Address:

42 E 11th Street

City:

Clifton

State: NJ

Zip: 07011

Telephone:

973-340-0144

Fax: 973-340-0144

Email: drzkorac@hotmail.com

CHARTER SCHOOL INFORMATION

Check box if requesting a planning year during the 2007-2008 school year.

List information below for the school years that the charter school will be serving students.

Operational Year	Grade Levels Served	Projected Enrollment (TOTAL)	Teachers and Instructional Aides	Classroom Teacher -to-Student Ratio
Year 1 2007-2008	9,10	160	# Teachers 12 # Inst. Aides	1:14
Year 2 2008-2009	9,10,11	240	# Teachers 14 # Inst. Aides	1:17
Year 3 2009-2010	9,10,11,12	320	# Teachers 18 # Inst. Aides	1:18
Year 4 2010-2011	9,10,11,12	320	# Teachers 20 # Inst. Aides	1:16

Zoran Korach, Ph.D.
Signature (Charter School Applicant Representative)

Date: 07/14/2006

2006 APPLICATION SUMMARY

The information coinformation needs	ontained in this summary ved to review the application	as well as all overviev	ersey State Department of Educ v of the proposal for a charter s	
	UNION SCIEN	CE ACADEMY C	HARTER SCHOOL	
(1	Complete	o Droper Name of	Charter School the name or identification of any private	
LOCATION (OF CHARTER SCHOOL	OOL		
Distric	t of Residence	ELIZABETH		
NOTE: If plan	ning to serve a region of r	esidence, identify the	contiguous districts that compri	ise the region.
Distric	ts in Region of			
Residence	N/AN			
Full Na Address City Teleph Teleph	CHOOL INFORMA Check box if requesti List information belo students.	nit 1 7 6946 96 2605 TION ng a planning year w for the school ye	State_NJ_ ZipFax: (908) 248 0758Email: foncul@fdu.e	nool year.
Operational Year	Grade Levels Served	Projected Enrollment (TOTAL)	Teachers and Instructional Aides	-to-Student Ratio
Year 1 2007-2008	K-5	360	# Teachers _25_ # Inst. Aides _10	1:20
Year 2 2008-2009	K-6	420	# Teachers _29 # Inst. Aides _11	1:20
Year 3 2009-2010	K-7	480	# Teachers33 # Inst. Aides12_	1:20
Year 4 2010-2011	K-8	540	# Teachers38 # Inst. Aides13	1:20

Signature (Charter School Applicant Representative)

07/17/06

Date